



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6614

SERIAL NUMBER 10/624,979	FILING DATE 07/22/2003  RULE	CLASS 005	GROUP ART UNIT 3673	ATTORNEY DOCKET NO. 7175-70579
-----------------------------	---------------------------------------	--------------	------------------------	--------------------------------------

APPLICANTS

Richard H. Heimbrock, Cincinnati, OH;  
 Jonathan D. Turner, Dillsboro, IN;

\*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 10/090,723 03/04/2002 PAT 6,618,882  
 which is a DIV of 09/780,803 02/09/2001 PAT 6,412,126  
 which is a DIV of 09/131,080 08/07/1998 PAT 6,282,738

O.K. R.S.

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

none R.S.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 08/09/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 16	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 7
---	---	---------------------------	-------------------------	-----------------------	----------------------------

Verified and Acknowledged

Examiner's Signature *[Signature]* Initials *R.S.*

ADDRESS  
 23643  
 BARNES & THORNBURG  
 11 SOUTH MERIDIAN  
 INDIANAPOLIS , IN  
 46204

TITLE  
 OB/GYN stretcher

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
------------	--	--

<p>RECEIVED 1086</p>	<p>No. _____ for following:</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>1.18 Fees ( Issue )</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Credit</td> </tr> </table>	<input type="checkbox"/>	1.18 Fees ( Issue )	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Credit
<input type="checkbox"/>	1.18 Fees ( Issue )							
<input type="checkbox"/>	Other _____							
<input type="checkbox"/>	Credit							